24/48 HOUR REPORT OF INDEPENDENT EXPENDITURES (Schedule E)

Schedule E)	FOR SE OF FORM 24/48
NAME OF COMMITTEE (In Full) National Rifle Association of America Political Victory Fund	FEC IDENTIFICATION NUMBER ▼ C C00053553
Check if 24-hour report 48-hour report New report Amends report filed	d on Mam / Dab / Yayayay
Full Name of Payee i360, LLC Mailing Address P.O. Box 37046	Date of Public Distribution/Dissemination M M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
City State Zip Code Baltimore MD 21297 Purpose of Expenditure Category/ Code	140.16 Transaction ID : 73483906 Date of Disbursement or Obligation
Name of Fodoral Conditates	e Sought: House District: President Senate State: OH
Calendar Year-To-Date Per Election for Office Sought Disb 2016	ursement For: Primary X General Other (specify) ▶
Full Name of Payee i360, LLC Mailing Address P.O. Box 37046	Date of Public Distribution/Dissemination 09 / 11 / 2016 Amount
City State Zip Code Baltimore MD 21297 Purpose of Expenditure Phone Bank Category/ Type 004	Transaction ID: 73483907 Date of Disbursement or Obligation
Sen. Ron Johnson Calendar Year-To-Date Disb	e Sought: House District: WI President Senate State: WI ursement For: Primary General
Per Election for Office Sought 0.00	Other (specify)
(a) SUBTOTAL of Itemized Independent Expenditures	273.60
(c) TOTAL Independent Expenditures	
Under penalty of perjury I certify that the independent expenditures reported herein were not me with, or at the request or suggestion of, any candidate or authorized committee or agent of either party committee) any political party committee or its agent.	•
Mary Rose Adkins [Electronically Filed] Date	09 12 / 2016

24/48 HOUR REPORT OF INDEPENDENT EXPENDITURES (Schedule E)

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AME OF COMMITTEE (In Full)	. .	FEC IDE	ENTIFICATION	NUMBER ▼
National Rifle Association of America Political Victory Fund		C	000053553	
check if 24-hour report 48-hour report New report	Amends report filed or	M = M /	D D / Y	YYYY
Full Name of Payee]	ate of Public	Distribution/Diss	semination
i360, LLC		09 /	11 / Y	2016
Mailing Address P.O. Box 37046	A	mount		
City State Zip C	Code			96.19
Baltimore MD 2129		ransaction ID	D: 73483908 rsement or Oblig	ation
Purpose of Expenditure Phone Bank Cate	egory/ Type 004	M = M /		YYYY
Name of Federal Candidate	Support Office S	ought:	House Dist	rict:
Sen. Roy Blunt		resident x	_	ate: MO
Calendar Year-To-Date Per Election for Office Sought	0.00 Disburse 2016	ement For:	Primary	x General
Per Election for Office Sought	0.00	Other (spe	ecify) 🕨	
Full Name of Payee i360, LLC	1	Date of Public	Distribution/Dist	semination
Mailing Address P.O. Box 37046		09	11	2016
	/	Amount		
City State Zip C	Code	1 1 0		94.37
Baltimore MD 2129		ansaction ID Date of Disbur	: 73483909 rsement or Oblig	gation
Purpose of Expenditure Phone Bank Cate	egory/ Type 004	M = M /	D D / Y	YYYY
Name of Federal Candidate	Support Office S	ought:	House Dist	rict:
Sen. Richard M. Burr		resident X	Senate St	ate: NC
Calendar Year-To-Date Per Election for Office Sought	0.00 Disburs 2016	ement For:	Primary	X General
rei Liection for Office Sought	0.00	Other (spe	ecify) 🕨	
(a) SUBTOTAL of Itemized Independent Expenditures	······	7	7	190.56
(b) SUBTOTAL of Unitemized Independent Expenditures				
(c) TOTAL Independent Expenditures	· [1 1 4	7	-
Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.				
Mary Rose Adkins [Electronically 1	Filed] Date 09	/ D D D	/ Y Y Y Y Y 2016	Y
Signature	- Date 00		2010	_

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OF

24/48 HOUR REPORT OF INDEPENDENT EXPENDITURES (Schedule E)

PAGE	3	OF	3		
FOR SE OF FORM 24/48					

	FOR SE OF FORM 24/48			
NAME OF COMMITTEE (In Full) National Rifle Association of America Political Victory Fund FEC IDENTIFICATION NUMBER **TOTAL COMMITTEE (In Full) NAME OF COMMITTEE (In Full) FEC IDENTIFICATION NUMBER **TOTAL COMMITTEE (In Full)				
	C C00053553			
Check if 24-hour report X 48-hour report New report Amends report filed on				
Full Name of Payee i360, LLC	Date of Public Distribution/Dissemination			
	09 / 11 / 2016			
Mailing Address P.O. Box 37046	Amount			
City State Zip Code	1052.65			
Baltimore MD 21297	Transaction ID: 73483910 Date of Disbursement or Obligation			
Purpose of Expenditure Phone Bank Category/ Type 004	M = M / D = D / Y = Y = Y			
Name of Federal Candidate Support	Office Sought: House District:			
Donald J Trump Oppose	resident Senate State:			
Calendar Year-To-Date Per Election for Office Sought 0.00	Disbursement For: Primary General 2016			
To Eloculor to Omeo Googni	Other (specify) ▶			
Full Name of Payee	Date of Public Distribution/Dissemination			
Mailing Address	M = M / D = D / Y = Y = Y = Y			
Mailing Address	Amount			
City State Zip Code				
Purpose of Expenditure Category/	Date of Disbursement or Obligation			
Type				
Name of Federal Candidate Support	Office Sought: House District:			
Oppose	President Senate State:			
Calendar Year-To-Date	Disbursement For: Primary General			
Per Election for Office Sought	Other (specify) ▶			
(a) SUBTOTAL of Itemized Independent Expenditures				
(b) SUBTOTAL of Unitemized Independent Expenditures				
(c) TOTAL Independent Expenditures	▶ 1516.81			
Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.				
Mary Rose Adkins [Electronically Filed] Date	e 09 12 2016			
Signature	50 12 2010			